

EXHIBIT 4 DATE 3-9-09 SB 51

2800 Tenth Avenue North P.O. Box 37000 Billings, Montana 59107-7000

Senate Bill 51

"An act adopting describing responsibilities of health care practitioners toward patients and requiring disclosure by referring health care practitioners of any financial interest associated with a referral"

Mark C. Rumans MD Physician in Chief Billings Clinic

Members of the Committee, I am Mark Rumans, M.D., the Physician in Chief at Billings Clinic. I am here today to speak in opposition to Senate Bill 51 which requires disclosure of employment or other financial interests associated with a referral by a health care practitioner.

Billings Clinic has at its core 220 physicians in a fully integrated, multispecialty group practice and over 60 midlevel practitioners all employed by the organization. We have over 800,000 separate patient encounters each year. As written, this bill would require disclosure of that employment status for every referral to each physician within Billings Clinic or for every therapy, lab test, or radiology procedure ordered within the organization. Based on our volume of referrals within Billings Clinic we have estimated the costs for implementation of this bill to be greater than \$400,000 annually. Across the state of Montana, nearly one third of all physicians are in an employment arrangement- many in critical access hospitals so this cost will be significant when multiplied throughout the State with little added value to patients.

We have also worked diligently to develop an integrated electronic medical record which eliminates the written referral for many of these items (therapy, lab, radiology). This bill would be a step backward in this development in that it states that this employment information must be disclosed on a "written referral" Patients appreciate this reduction in paperwork.

I had the opportunity to be apart of the group that work in the interim with the SJR15 Interim Committee on health issues for Montana. The issue of disclosure and transparency was frequently discussed. One focus of the discussion was to ensure appropriate disclosure by physicians when there was a direct financial benefit that occurred when a patient was referred to a facility where the physician had an ownership interest. Employed physicians and other employed heath practitioners do not have that direct financial benefit or gain when ordering lab or x-rays within the organization that employs them.

Many of you have probably been patients. The top concerns we hear from our patients are cost of care, extra paperwork, and the lack of time they get to spend with their doctor. Now, imagine you are a patient of one of our rural providers in Montana employed by a critical access hospital. Every time he or she sends you to the hospital for a lab test or x-ray you have to sign a new form which discloses they are employed by the hospital.

Now worse, imagine you or a family member has a serious chronic disease like diabetes, heart failure, or even cancer which might require monthly or even weekly trips to the lab. Every referral would require a signed disclosure form taking more time away from the actual reason for the visit, adding more cost and paperwork but adding no value.

I urge you to vote against SB 51. Thank you for your consideration.